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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: | Identify Yourself | | |
|-----|-----------------------|---|---|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exar | e the name that is on government-issued ire identification (for nple, your driver's | Simonne First name R. | First name |
| | licer | se or passport). | Middle name | Middle name |
| | iden | g your picture tification to your ting with the trustee. | Williams Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | ide your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number | xxx-xx-0841 | |
| | | | | |

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Case number (if known)

Debtor 1 Simonne R. Williams

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | | |
| | | 400 East 33rd Street Apartment 915 Chicago, IL 60616 | | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| Cook | | | | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing | Check one: | Check one: | | | |
| | this district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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Debtor 1 Simonne R. Williams

Case number (if known)

| Part | 2: Tell the Court About | our B | ankruptcy Ca | se | | | |
|------|---|---|-----------------|---|--|--|--------------------------|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | |
| | choosing to file under | ■ C | hapter 7 | | | | |
| | | □ с | hapter 11 | | | | |
| | | □ с | hapter 12 | | | | |
| | | □ с | hapter 13 | | | | |
| | | | | | | | |
| 8. | How you will pay the fee | | about how yo | u may pay. Typ attorney is subr | oically, if you are paying the f | check with the clerk's office in your loca ee yourself, you may pay with cash, cas r behalf, your attorney may pay with a cr | hier's check, or money |
| | | | | | tallments. If you choose this is (Official Form 103A). | option, sign and attach the Application | for Individuals to Pay |
| | | | | request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that | | | |
| | | | applies to you | ır family size ar | nd you are unable to pay the | fee in installments). If you choose this o | ption, you must fill out |
| | | | the Application | n to Have the (| Chapter 7 Filing Fee Waived | (Official Form 103B) and file it with your | petition. |
| | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No | D. | | | | |
| | last 8 years? | ☐ Ye | es. | | | | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| 10. | Are any bankruptcy | ■ No | <u> </u> | | | | |
| | cases pending or being filed by a spouse who is | □Ye | | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if know | n |
| | | | Debtor | | | Relationship to you | |
| | | | District | - | When | Case number, if know | n |
| 11. | Do you rent your residence? | ■ No | Go to l | ne 12. | | | |
| | | ☐ Ye | es. Has yo | ur landlord obta | ained an eviction judgment a | gainst you and do you want to stay in yo | ur residence? |
| | | | | No. Go to line | 12. | | |
| | | | | Yes. Fill out In bankruptcy pet | | ction Judgment Against You (Form 101A |) and file it with this |
| | | | | | | | |

| ebtor 1 | Simonne R. Williams | Document | Page 4 of 45 | Case number (if known) | |
|---------|---------------------|----------|--------------|------------------------|--|
|---------|---------------------|----------|--------------|------------------------|--|

| Part | Report About Any Bu | sinesses | You Own | as a Sole Proprietor | | |
|------|---|--|--|--|------------------|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | |
| | | ☐ Yes. | Name | and location of business | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | Name of business, if any | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | Number, Street, City, State & ZIP Code | | |
| | it to this petition. | Check the appropriate box to describe your business: | | | | |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process. | | | et, statement of | |
| | For a definition of small | No. | I am r | ot filing under Chapter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | |
| | | ☐ Yes. | I am f | ing under Chapter 11 and I am a small business debtor according to the definition in the B | ankruptcy Code. | |
| Part | 4: Report if You Own or | Have Anv | Hazardo | us Property or Any Property That Needs Immediate Attention | | |
| | Do you own or have any | | | | | |
| 14. | property that poses or is alleged to pose a threat of imminent and | ■ No. □ Yes. | What is | ne hazard? | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | ate attention is why is it needed? | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? Number, Street, City, State & Zip Code | | |
| | | | | | | |

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Debtor 1 Simonne R. Williams

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 Simonne R. Willia | | Docume Docume | | 45 Case number (if know | |
|------|---|--------------------|--|-------------------------------------|------------------------------|---|
| | | | Association Programme | | | |
| Part | | | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily co- individual primarily for a pers | | | 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16b. | Are your debts primarily be money for a business or investigation. | | | |
| | | | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts you o | we that are not consume | er debts or business debts | ; |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter | 7. Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. I are paid that funds will be av | | | excluded and administrative expense |
| | administrative expenses | | ■ No | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | Yes | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | | 25,001-50,000 |
| | you estimate that you owe? | 50-99 | | □ 5001-10,000 □ 10,001 35,000 | | ☐ 50,001-100,000 ☐ More than100,000 |
| | | ☐ 100-1 ☐ 200-9 | | □ 10,001-25,000 |) <u> </u> | wore than 100,000 |
| 19. | How much do you | \$0 - \$ | \$50,000 | □ \$1,000,001 - \$ | S10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | | 001 - \$100,000 | \$10,000,001 - | | \$1,000,000,001 - \$10 billion |
| | | | ,001 - \$500,000 ,001 - \$1 million | □ \$50,000,001 - □ \$100,000,001 | | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion |
| 20. | How much do you | \$ 0 - \$ | \$50,000 | \$1,000,001 - \$ | | ☐ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | | 001 - \$100,000 | \$10,000,001 - | _ | \$1,000,000,001 - \$10 billion |
| | | | ,001 - \$500,000 .001 - \$1 million | □ \$50,000,001 - □ \$100,000,001 | | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion |
| | | ப \$500 | .001 - \$1 million | | | - More than too simon |
| Part | | | | | | |
| For | you | I have ex | xamined this petition, and I dec | clare under penalty of per | rjury that the information p | provided is true and correct. |
| | | | chosen to file under Chapter 7 states Code. I understand the r | | | Chapter 7, 11,12, or 13 of title 11, or proceed under Chapter 7. |
| | | | orney represents me and I did int, I have obtained and read th | | | orney to help me fill out this |
| | | I reques | t relief in accordance with the | chapter of title 11, United | States Code, specified in | this petition. |
| | | bankrup and 357 | tcy case can result in fines up | | | erty by fraud in connection with a r both. 18 U.S.C. §§ 152, 1341, 1519 |
| | | Simon | ne R. Williams | | Signature of Debtor 2 | |

Executed on

MM / DD / YYYY

Executed on July 24, 2017 MM / DD / YYYY

Debtor 1 Simonne R. Williams

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Daniel | R. Kolodziej | Date | July 24, 2017 | |
|-----------------------|--------------------------|---------------|----------------|--|
| Signature of | f Attorney for Debtor | | MM / DD / YYYY | |
| Daniel R. I | Kolodziej | | | |
| Borovsky Firm name | & Ehrlich | | | |
| | Wacker Drive | | | |
| Chicago, I | IL 60601 | | | |
| Number, Street, | , City, State & ZIP Code | | | |
| Contact phone | (312) 861-0808 | Email address | | |
| 6283283 | | | | |
| Bar number & S | State | | | |

| | | Docume | ent Page 8 of 45 | <u> </u> | |
|---------------------|--------------------------|-------------------|------------------|----------|---------------------------------|
| Fill in this infor | rmation to identify your | case: | | | |
| Debtor 1 | Simonne R. Willia | ams | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

if this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Par | 1: Summarize Your Assets | | |
|-----|--|---------------------|----------------------------|
| | | Your as Value of | sets what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 3,219.72 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 3,219.72 |
| Par | 2: Summarize Your Liabilities | | |
| | | Your lia Amount | bilities you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 9,627.00 |
| | Your total liabilities | \$ | 9,627.00 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,382.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,290.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | edules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for | a nersonal i | family or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Case number (if known) Debtor 1 Simonne R. Williams

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 1,877.00 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total cla | im |
|--|-----------|------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | | Documei | nt Page 10 of 45 | |
|----------------------|--|-----------------------------------|--|---|
| Fill in this infor | mation to identify yo | ur case and this filing: | | |
| Debtor 1 | Simonne R. Wi | lliams | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | First Name | Middle Name | Loot Name | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the | : NORTHERN DISTRICT O | PF ILLINOIS | |
| Case number | | | | П о |
| Case number | | | | ☐ Check if this is an amended filing |
| | | | | amenaca ming |
| | | | | |
| <u>Official Fo</u> | orm 106A/B | | | |
| Schedul | le A/B: Pro | perty | | 12/15 |
| | | · • | nce. If an asset fits in more than one category, list the | |
| hink it fits best. I | Be as complete and acc re space is needed, atta | urate as possible. If two married | I people are filing together, both are equally responsi . On the top of any additional pages, write your name | ble for supplying correct |
| Part 1: Describe | Each Residence, Build | ing, Land, or Other Real Estate | You Own or Have an Interest In | |
| . Do you own or | have any legal or equite | able interest in any residence, b | uilding, land, or similar property? | |
| ■ No. Go to Pa | art 2. | | | |
| ☐ Yes. Where | is the property? | | | |
| | , | | | |
| Part 2: Describe | Your Vehicles | | | |
| | | | icles, whether they are registered or not? Include G: Executory Contracts and Unexpired Leases. | le any vehicles you own that |
| B. Cars, vans, to | rucks, tractors, sport | utility vehicles, motorcycles | S | |
| ■ No | | | | |
| | | | | |
| ☐ Yes | | | | |
| | • | | al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories | |
| ■ No | | | | |
| ☐ Yes | | | | |
| — 100 | | | | |
| | | | | |
| 5 Add the doll | ar value of the portic | n you own for all of your en | tries from Part 2, including any entries for | *** |
| .pages you h | ave attached for Par | 2. Write that number here | | \$0.00 |
| | | | | |
| | Your Personal and Ho | | | |
| Do you own or | have any legal or eq | uitable interest in any of the | following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| • | oods and furnishing | | | |
| Examples: M | ajor appliances, turniti | ure, linens, china, kitchenware | | |
| Yes. Desc | cribe | | | |
| — 103. Desc | J. 100 | | | |
| | Used H | ousehold Furniture and F | Furnishings | \$500.00 |
| | <u> </u> | | | |
| 7. Electronics | | | | |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

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Case number (if known) Document Debtor 1 Simonne R. Williams 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... **Used Clothing** \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$700.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ Yes..... **Ten Dollars** \$10.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No
■ Yes......Institution name:

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Case number (if known) Document Debtor 1 Simonne R. Williams

| | | 17.1. | Checking | Credit Union 1 | | \$2,504.66 |
|-----|--|------------------------------|--|--|-----------------------------------|--|
| | | 17.2. | Savings | Credit Union 1 | | \$5.06 |
| 18. | Bonds, mutual funds, or Examples: Bond funds, ir ■ No □ Yes | | | okerage firms, money market ac | counts | |
| 19. | | ck and | | orated and unincorporated bu | sinesses, including an interes | st in an LLC, partnership, and |
| | ☐ Yes. Give specific infor | | about them me of entity: | | % of ownership: | |
| 20. | Negotiable instruments ir | nclude points are | personal checks, cas those you cannot tra | otiable and non-negotiable instables instables instables in subject of the state of | s, and money orders. | |
| 21. | Retirement or pension a Examples: Interests in IR No Yes. List each account | A, ERIS | SA, Keogh, 401(k), 4 | 403(b), thrift savings accounts, or Institution name: | r other pension or profit-sharing | plans |
| 22. | Examples: Agreements v | deposit | s you have made so | o that you may continue service of public utilities (electric, gas, water | | nies, or others |
| | ■ No □ Yes | | | Institution name or individ | dual: | |
| 23. | No | · | dic payment of mone | ey to you, either for life or for a n | umber of years) | |
| 24. | Interests in an education 26 U.S.C. §§ 530(b)(1), 52 ■ No | ı IRA, i ı 29A(b), | n an account in a q and 529(b)(1). | qualified ABLE program, or und | | |
| 25. | Trusts, equitable or futu ■ No □ Yes. Give specific infor | | | other than anything listed in lin | ne 1), and rights or powers exe | ercisable for your benefit |
| 26. | Patents, copyrights, trac | demark | s, trade secrets, a | nd other intellectual property eds from royalties and licensing a | agreements | |
| | ☐ Yes. Give specific infor | mation | about them | | | |
| 27. | Licenses, franchises, ar Examples: Building perm ■ No | | | les perative association holdings, liq | uor licenses, professional licens | es |
| | ☐ Yes. Give specific infor | mation | about them | | | |
| M | oney or property owed to | you? | | | | Current value of the portion you own? Do not deduct secured |

claims or exemptions.

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Case number (if known) Document Debtor 1 Simonne R. Williams 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,519.72 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

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Debtor 1 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 Part 3: Total personal and household items, line 15 \$700.00 57. Part 4: Total financial assets, line 36 \$2,519.72 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$3,219.72

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

\$3,219.72

\$3,219.72

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

| | | I A A A HIII. | 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | |
|---|------------------------|-------------------|---|--|--|--|
| Fill in this inform | ation to identify your | case: | | | | |
| Debtor 1 | Simonne R. Williams | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | | |
| | | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | e Amount of the exemption you claim | | Specific laws that allow exemption |
|---|--|---|---|
| Copy the value from Schedule A/B | Chec | ck only one box for each exemption. | |
| \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) |
| | ☐ 100% of fair market value, up any applicable statutory limit | | |
| \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(a) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$10.00 | | \$10.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$2,504.66 | | \$2,504.66 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$5.06 | | \$5.06 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| | \$200.00 \$2,504.66 | \$200.00 | Check only one box for each exemption. \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$200.00 \$200.00 \$200.00 \$100% of fair market value, up to any applicable statutory limit \$10.00 \$100% of fair market value, up to any applicable statutory limit \$10.00 \$100% of fair market value, up to any applicable statutory limit \$2,504.66 \$2,504.66 \$100% of fair market value, up to any applicable statutory limit \$5.06 \$5.06 \$100% of fair market value, up to any applicable statutory limit |

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Debtor 1 Simonne R. Williams

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Fill in this information to identify your case: Debtor 1 Simonne R. Williams Middle Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | Ouse 11 21541 Boo | Document Document | Page 18 of | 45 | 30 Man |
|--------------------------|---|--|--------------------------|--|----------------------------|
| Fill i | n this information to identify your case: | | | | |
| Debt | or 1 Simonne R. Williams | | | | |
| | First Name | Middle Name | Last Name | | |
| Debt | | Maddle Mann | LastName | | |
| (Spou | se if, filing) First Name | Middle Name | Last Name | | |
| Unite | ed States Bankruptcy Court for the: NO | RTHERN DISTRICT OF ILI | INOIS | | |
| Case | e number | | | | |
| (if kno | wn) | | | | Check if this is an |
| | | | | | amended filing |
| Offi | cial Form 106E/F | | | | |
| | nedule E/F: Creditors Who | Have Unsecured | Claims | | 12/15 |
| | complete and accurate as possible. Use Part | | | for creditors with NONPRIORITY cl | |
| Sched eft. At name | lule G: Executory Contracts and Unexpired L lule D: Creditors Who Have Claims Secured I ttach the Continuation Page to this page. If y and case number (if known). | oy Property. If more space is out have no information to rep | needed, copy the Pa | art you need, fill it out, number the e | ntries in the boxes on the |
| Part | 1: List All of Your PRIORITY Unsecu Do any creditors have priority unsecured claim | | | | |
| _ | No. Go to Part 2. | ns against you? | | | |
| | No. Go to Part 2. | | | | |
| Part | | secured Claims | | | |
| | o any creditors have nonpriority unsecured | | | | |
| | ☐ No. You have nothing to report in this part. Su | | your other schedules | | |
| _ | <u> </u> | ioniit this form to the court with | your other scriedules | • | |
| | Yes. | | | | |
| u th | List all of your nonpriority unsecured claims in ensecured claim, list the creditor separately for each one creditor holds a particular claim, list the Part 2. | ach claim. For each claim listed | I, identify what type of | f claim it is. Do not list claims already in | ncluded in Part 1. If more |
| | | | | | Total claim |
| 4.1 | Capital One | Last 4 digits of acc | ount number 951 | 14 | \$506.00 |
| | Nonpriority Creditor's Name P.O. Box 30253 | When was the debt | inourrod? | | |
| | Salt Lake City, UT 84130-0253 | When was the debt | | | _ |
| | Number Street City State Zlp Code | As of the date you | file, the claim is: Che | eck all that apply | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | <u></u> ' | RITY unsecured clain | n: | |
| | ☐ Check if this claim is for a community | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising report as priority claing | | agreement or divorce that you did not | |
| | ■ No | | | ns, and other similar debts | |
| | ☐ Yes | Other. Specify | | | |
| | _ 100 | Other. Specify _ | | | _ |

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| 4.2 | Capital One | Last 4 digits of account number 9857 | \$982.00 | |
|-----|---|---|----------|--|
| | Nonpriority Creditor's Name P.O. Box 30281 | When was the debt incurred? | | |
| | Salt Lake City, UT 84130-0281 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify Credit Card | | |
| 4.3 | Capital One | Last 4 digits of account number 0486 | \$946.00 | |
| | Nonpriority Creditor's Name P.O. Box 30281 Salt Lake City, UT 84130-0281 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | <u> </u> | | |
| | | ☐ Disputed Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify Credit Card | | |
| 4.4 | Capital One / Neiman Marcus | Last 4 digits of account number 4916 | \$540.00 | |
| | Nonpriority Creditor's Name P.O. Box 30253 | When was the debt incurred? | | |
| | Salt Lake City, UT 84130-0253 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | lacktriangle Obligations arising out of a separation agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Yes | Other. Specify Credit Card | | |
| | | | | |

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■ Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community

Is the claim subject to offset?

■ No ☐ Yes ☐ Contingent

■ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 \square Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit Card

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Case number (if know) Debtor 1 Simonne R. Williams 4.8 \$187.00 Macys Last 4 digits of account number 5228 Nonpriority Creditor's Name P.O. Box 8218 When was the debt incurred? Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.9 SYNCB/OLD NAVY Last 4 digits of account number 7112 \$186.00 Nonpriority Creditor's Name PO Box 965036 When was the debt incurred? Orlando, FL 32896-5036 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.1 **TD Bank USA** 3155 \$1,994.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 673 When was the debt incurred? Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 Simonne R. Williams

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 9,627.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 9,627.00 |

| | | IAMAIIII. | 111 17111.731115 | •.] |
|---------------------|--------------------------|-------------------|------------------|------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Simonne R. Willia | ams | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the o | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-----------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | | | | | _ |
| | Number | Street | | | |
| | | | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | Number | Olicot | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | Oity | | Otato | Zii Oodo | |
| 2.5 | Name | | | | _ |
| | ivame | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | | | | | |
| | | | | | _ |
| | Number | Street | | | |
| | | | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | MULLIDE | Gueer | | | |
| | City | | State | ZIP Code | _ |
| | Oity | | Otate | ∠II OUUG | |

| | | Docume | <u>nt Page 24 d</u> | of 45 | |
|--|---|---|---------------------------|---|--|
| Fill in this i | nformation to identify your | case: | | | |
| Debtor 1 | Simonne R. Willia | ome | | | |
| Debior 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing |) First Name | Middle Name | Last Name | | |
| United State | s Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numbe | ar. | | | | |
| (if known) | <u> </u> | | | ПС | neck if this is an |
| | | | | an | nended filing |
| Schedu Codebtors a Deople are fi | iling together, both are equ | re also liable for any deb ally responsible for supp | lying correct informat | s complete and accurate as possib ion. If more space is needed, copy to this page. On the top of any Addit | the Additional Page, |
| our name a | ind case number (if known) | . Answer every question. | _ | | - |
| 1. Do yo | ou have any codebtors? (If | you are filing a joint case, o | do not list either spouse | as a codebtor. | |
| No | | | | | |
| ☐ Yes | | | | | |
| Arizona | n the last 8 years, have you, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou | Nevada, New Mexico, Pu | erto Rico, Texas, Wash | y? (Community property states and te ington, and Wisconsin.) | rritories include |
| in line 2 Form 10 out Col | 2 again as a codebtor only i 06D), Schedule E/F (Official | f that person is a guarant | or or cosigner. Make | if your spouse is filing with you. Li sure you have listed the creditor on 16G). Use Schedule D, Schedule E/F | Schedule D (Official , or Schedule G to fil |
| | ime, Number, Street, City, State and Z | P Code | | Check all schedules that apply: | |
| 3.1 | | | | ☐ Schedule D, line | |
| | ame | | | ☐ Schedule D, line | - |
| | | | | ☐ Schedule C/I , line | |
| | | | | | - |
| | umber Street ty | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | ☐ Schedule D, line | _ |
| Na | ame | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | = |
| N | umber Street | | | _ | |
| Ci | | State | ZIP Code | | |

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| Fill | in this information to identify your ca | ase: | | | | | | |
|---------------------------|--|-------------------------------|--|----------------------|--------------------------|-------------------------------|---|---------------------------------|
| | otor 1 Simonne R. | | | | | | | |
| | otor 2 | | | | _ | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | |
| (If kr | fficial Form 106l | | | | | 13 income | ed filing ent showing post as of the followir | tpetition chapter ng date: |
| _ | chedule I: Your Inc | ome | | | | MM / DD/ Y | YYY | 12/15 |
| sup spo atta Par | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. **Describe Employment** | are married and not filing wi | ng jointly, and your s _i th you, do not includ | pouse is e inforn | s living w nation abo | ith you, incl out your spo | ude information ouse. If more sp | n about your pace is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | Debtor 2 or non-filing spouse | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | | ☐ Emple | • | |
| | information about additional employers. | , ., | ☐ Not employed | | | ☐ Not employed | | |
| | Include part-time, seasonal, or | Occupation | Room Attendant | | | | | |
| | self-employed work. | Employer's name | Employer's name Hotel Allegro | | | _ | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 171 W. Randolph Chicago, IL 6060 | | | | | |
| | | How long employed to | here? 2 years | | | | | |
| Pai | Give Details About Mor | nthly Income | | | | | | |
| | mate monthly income as of the dause unless you are separated. | ate you file this form. If | you have nothing to rep | oort for a | any line, w | rite \$0 in the | space. Include | your non-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | for all e | mployers t | for that perso | on on the lines be | elow. If you need |
| | | | | | For I | Debtor 1 | For Debtor 2 non-filing sp | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 1,877.00 | \$ | N/A |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | N/A |

Calculate gross Income. Add line 2 + line 3.

1,877.00

N/A

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| Deb | tor 1 | Simonne R. Williams | - | С | ase | number (if ki | nown) | | | | |
|-----|--------------------|--|-----------|------------|-----------------|---------------|--------------|------------|--------------------------|---------------|--------------------|
| | | | | | | Debtor 1 | | no | or Debtor on-filing s | spouse | |
| | Cop | by line 4 here | 4. | | \$ | 1,877 | 7.00 | \$ | | N/A | <u>\</u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ١. | \$ | 439 | 9.00 | \$ | | N/A | ١ |
| | 5b. | Mandatory contributions for retirement plans | 5b |). | \$ | | 0.00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c | : . | \$ | (| 0.00 | \$ | | N/A | - |
| | 5d. | Required repayments of retirement fund loans | 5d | l. | \$ | | 0.00 | \$ | | N/A | |
| | 5e. | Insurance | 5e | | \$ | | 0.00 | \$ | | N/A | |
| | 5f. | Domestic support obligations | 5f. | | \$ | | 0.00 | . \$ | | N/A | _ |
| | 5g. | Union dues Other deductions Specific | 5g | • | \$_ \$ | | 00.6 | \$ | | N/A | |
| | 5h. | Other deductions. Specify: | _ 5h | 1.+ | Φ <u> </u> | | 0.00 | | | N/A | |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | , | \$ | | 5.00 | . \$ | | N/A | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | ; | \$ | 1,382 | 2.00 | . \$ | | N/A | <u>\</u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | | \$ | | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b | | _{\$} — | | 0.00 | . Ψ. | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | | * \$ | | 0.00 | \$ | | N/A | _ |
| | 8d. | Unemployment compensation | 8d | ١. | \$ | | 0.00 | | | N/A | |
| | 8e. | Social Security | 8e |) . | \$ | (| 0.00 | \$ | | N/A | \ |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. 8g | | \$ | | 0.00 0.00 | \$. \$ | | N/A | |
| | 8h. | Other monthly income. Specify: | 8h | , | \$ — | | | | | N/A | _ |
| | 0 | | | | | <u>'</u> | | . — | | | <u>`</u> |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | _ | (| 0.00 | \$ | | N/ | 'A |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,382.00 | + \$ | | N/A | = \$ | 1,382.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | ., | | | | <u> </u> | 1,00=100 |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | depe | | | | | • | Schedule | e J. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | | | \$ | 1,382.00 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | | | Comb month | ined ily income |
| | | No. | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Fill in this info | rmation to identify yo | ur case: | | | | | |
|--------------------------------|---|------------------------|--|--|-------------------------------|---|---|
| Debtor 1 | Simonne R. V | | | | Chec | k if this is: | |
| D.11. 0 | | | | | _ | An amended filing | |
| Debtor 2 (Spouse, if filing | j) | | | | | | ving postpetition chapter the following date: |
| United States B | ankruptcy Court for the: | NORTH | HERN DISTRICT OF ILLIN | OIS | Ī | MM / DD / YYYY | |
| Case number (If known) | | | | | | | |
| | Form 106J | | | | | | |
| Be as compleinformation. | Ile J: Your I ete and accurate as If more space is nee nown). Answer ever | possible eded, atta | . If two married people ar ich another sheet to this | e filing together, be form. On the top of | oth are equa f any additio | ally responsible fo nal pages, write y | 12/15 or supplying correct your name and case |
| | escribe Your House | hold | | | | | |
| _ | joint case? So to line 2. | | | | | | |
| | Does Debtor 2 live i | n a separ | ate household? | | | | |
| _ | □ No □ Yes. Debtor 2 mus | t file Offici | al Form 106J-2, <i>Expense</i> s | for Separate House | ehold of Debt | or 2. | |
| 2. Do you | have dependents? | ■ No | | | | | |
| Do not li Debtor 2 | st Debtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? |
| Do not s | | | | | | | □ No |
| depende | ents names. | | | | | | □ Yes □ No |
| | | | | | | | ☐ Yes |
| | | | | | | | □ No |
| | | | | | | | ☐ Yes |
| | | | | | | | □ No |
| 2 D a | | _ | | | | | ☐ Yes |
| | expenses include es of people other the | nan | No | | | | |
| yourself | and your depender | nts? ⊔ | Yes | | | | |
| Estimate you | of a date after the b | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| | such assistance and | | government assistance in Sluded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| | tal or home owners | | ses for your residence. In | nclude first mortgage | e 4. \$ | | 720.00 |
| If not inc | cluded in line 4: | | | | | | |
| 4a. Re | eal estate taxes | | | | 4a. \$ | | 0.00 |
| | operty, homeowner's | , or renter | 's insurance | | 4b. \$ | | 0.00 |
| | ome maintenance, re | | | | 4c. \$ | | 0.00 |
| | omeowner's associat | | | ma aquitu la ara | 4d. \$ 5. \$ | | 0.00 |
| ા. Addition | iai illortudue bavme | anto ror vo | our residence , such as ho | me equity loans | ე. ბ | | 0.00 |

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| Debtor | 1 Simonn | e R. Williams | Case num | ber (if known) | |
|-----------------|-----------------------------------|---|--------------|---|-----------------------|
| 6. U | Itilities: | | | | |
| - | | /, heat, natural gas | 6a. | \$ | 0.00 |
| | | ewer, garbage collection | 6b. | · - | 0.00 |
| _ | | e, cell phone, Internet, satellite, and cable services | 6c. | · | 120.00 |
| | d. Other. Sp | | 6d. | · | 0.00 |
| _ | | sekeeping supplies | 7. | · | 250.00 |
| | | children's education costs | 7. 8. | · | |
| _ | | | o. 9. | · | 0.00 |
| | - | dry, and dry cleaning | | \$ | 80.00 |
| | | products and services | 10. | · | 20.00 |
| | | ental expenses | 11. | \$ | 0.00 |
| | ransportation To not include o | Include gas, maintenance, bus or train fare. Par payments | 12. | \$ | 100.00 |
| | | , clubs, recreation, newspapers, magazines, and books | 13. | · | 0.00 |
| | | tributions and religious donations | 14. | · | 0.00 |
| | naritable con nsurance. | uributions and rengious donations | 14. | Ψ | 0.00 |
| | | nsurance deducted from your pay or included in lines 4 or 20. | | | |
| | 5a. Life insur | | 15a. | \$ | 0.00 |
| | 5b. Health ins | | 15b. | · | 0.00 |
| | 5c. Vehicle in | | 15b. | · - | 0.00 |
| | | urance. Specify: | 15d. | · | |
| | | nclude taxes deducted from your pay or included in lines 4 or 20. | 13u. | Ψ | 0.00 |
| _ | axes. Do not in Specify: | nctude taxes deducted from your pay of included in lines 4 of 20. | 16. | \$ | 0.00 |
| | | lease payments: | | <u> </u> | 0.00 |
| | | nents for Vehicle 1 | 17a. | \$ | 0.00 |
| | | nents for Vehicle 2 | 17b. | · | 0.00 |
| | 7c. Other. Sp | | 17c. | · | 0.00 |
| | 7d. Other. Sp | • | 17d. | · | 0.00 |
| | | s of alimony, maintenance, and support that you did not report as | | Ψ | 0.00 |
| | | your pay on line 5, Schedule I, Your Income (Official Form 106I). | | \$ | 0.00 |
| | | ts you make to support others who do not live with you. | | \$ | 0.00 |
| | Specify: | • | 19. | | |
|). O | ther real prop | perty expenses not included in lines 4 or 5 of this form or on School | edule I: Yo | our Income. | |
| | | es on other property | 20a. | | 0.00 |
| | 0b. Real esta | | 20b. | \$ | 0.00 |
| 2 | Oc. Property. | homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | | nce, repair, and upkeep expenses | 20d. | | 0.00 |
| | | ner's association or condominium dues | 20e. | | 0.00 |
| | Other: Specify: | | | +\$ | 0.00 |
| | other. Specify. | | | Τψ | 0.00 |
| 2. C | alculate your | monthly expenses | | | |
| 2 | 2a. Add lines 4 | 4 through 21. | | \$ | 1,290.00 |
| 2 | 2b. Copy line 2 | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | | 2a and 22b. The result is your monthly expenses. | | \$ | 1,290.00 |
| | | | | | 1,200.00 |
| | - | monthly net income. | | | |
| | | e 12 (your combined monthly income) from Schedule I. | 23a. | | 1,382.00 |
| 2 | 3b. Copy you | r monthly expenses from line 22c above. | 23b. | -\$ | 1,290.00 |
| | | | | | |
| 2 | | your monthly expenses from your monthly income. | 23c. | \$ | 92.00 |
| | i ne resul | It is your monthly net income. | 230. | ΙΨ | J2.00 |
| ים ₄ |)o vou expect | an increase or decrease in your expenses within the year after yo | ou file this | s form? | |
| | | ou expect to finish paying for your car loan within the year or do you expect you | | | or decrease because o |
| | | e terms of your mortgage? | - 3-3-1 | , , : : : : : : : : : : : : : : : : : : | |
| | No. | | | | |
| | ☐ Yes. | Explain here: | | | |
| | - 100. | 1 1 | | | |

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| Fill in this infor | mation to identify your | case: | | | | |
|---------------------|--|--------------------------|-----------------|------------------------|-----------------------|--|
| Debtor 1 | Simonne R. Willia | ams | | | | |
| | First Name | Middle Name | La | st Name | | |
| Debtor 2 | - <u>-</u> | | | | | |
| (Spouse if, filing) | First Name | Middle Name | La | st Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLING | DIS | | |
| Case number | | | | | | |
| (if known) | | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| | | | | | | |
| 00000 | 400D | | | | | |
| Official Forr | | | | | | |
| Declarat | tion About a | ın Individua | I Debt | or's Sche | edules | 12/15 |
| | | | | | | |
| If two married pe | eople are filing togethe | r, both are equally resp | onsible for | supplying correct | information. | |
| Va | :- fb f: | la hanlmuntar aabadud | | | librar a fallan atatı | |
| | | | | | | ement, concealing property, or 00, or imprisonment for up to 20 |
| | 18 U.S.C. §§ 152, 1341, 1 | | initiapitoy out | se our result iii iiii | cs αρ το ψ2ου,υτ | or, or imprisonment for up to 20 |
| | | | | | | |
| | | | | | | |
| Sig | n Below | | | | | |
| | | | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an atto | orney to help | p you fill out banki | ruptcy forms? | |
| ■ No | | | | | | |
| □ Yes. | Name of person | | | | Attach Ran | kruptcy Petition Preparer's Notice, |
| □ 165.1 | Maine or person | | | | | a, and Signature (Official Form 119) |
| | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | | | | | | |
| | alty of perjury, I declare re true and correct. | that I have read the sui | mmary and | schedules filed wi | th this declaration | on and |
| X /s/ Sim | nonne R. Williams | | х | | | |
| | ne R. Williams | | | Signature of Debt | tor 2 | |
| | re of Debtor 1 | | | ga.a. 0 0. 2000 | | |
| _ | | | | | | |
| Date _ | July 24, 2017 | | | Date | | |

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| Fill in | this inform | ation to identify you | r case: | | | |
|-----------|----------------------|---|--|---|--|---|
| Debto | r 1 | Simonne R. Will | iams | | | |
| | _ | First Name | Middle Name | Last Name | | |
| (Spouse | r 2 e if, filing) | First Name | Middle Name | Last Name | | |
| United | l States Ban | kruptcy Court for the: | NORTHERN DISTRICT O | OF ILLINOIS | | |
| _ | | aptoy Court to title | | | | |
| (if known | number | | | | _ | Check if this is an mended filing |
| Offic | cial For | m 107 | | | | |
| | | | Affairs for Individ | duals Filing for B | ankruptcy | 4/10 |
| inform | ation. If mo | ore space is needed,). Answer every que | attach a separate sheet to | this form. On the top of any | equally responsible for sup y additional pages, write you | |
| | | current marital statu | | | | |
| | Married Not marr | ied | | | | |
| 2. Di | uring the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | No Yes. List | all of the places you l | ived in the last 3 years. Do no | ot include where you live now | ı. | |
| D | Debtor 1 Price | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | ldress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territor ico, Texas, Washington and V | |
| | No No. | ro quro vou fill out Sol | nedule H: Your Codebtors (Of | fficial Form 106H) | | |
| | ı res. Mar | te sure you iii out S <i>ci</i> | ledule H. Your Codebiors (Oi | iliciai Foim 100H). | | |
| Part 2 | Explain | the Sources of You | r Income | | | |
| Fi | II in the total | amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? |
| | l No | | | | | |
| | Yes. Fill i | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until I for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$11,261.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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Case number (if known) Debtor 1 Simonne R. Williams

| | | | | Debtor 1 | | | | | Debtor 2 | | |
|-----|--|---|---|---|--|--|--|--|--|--|---|
| | | | | Sources | of income that apply. | (be | oss income fore deductions clusions) | and | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | last caler nuary 1 to | dar year: December 3 | 31, 2016) | ■ Wages | , commissions, tips | | \$23,93 | 9.00 | ☐ Wages, combonuses, tips | missions, | |
| | | | | ☐ Operat | ating a business | | | ☐ Operating a | business | | |
| | For the calendar year before that: (January 1 to December 31, 2015) | | ■ Wages | , commissions, | \$17,668.00 | | 8.00 | ☐ Wages, commissions, bonuses, tips | | | |
| | | | | ☐ Operat | ing a business | | | | ☐ Operating a business | | |
| | Include include include and other winnings. List each and the lis | come regardl public benefi If you are filir | ess of wheth t payments; ng a joint cas ne gross inco | er that incompensions; researched | | imples est; di ou red | s of other incomination of the serior of the | e are ali collecte list it on | ed from lawsuits; ly once under De | royalties; and ebtor 1. | ecurity, unemployment, I gambling and lottery |
| | | | | Debtor 1 | | | | | Debtor 2 | | |
| | | | | Sources of Describe b | | eac (be | oss income from th source fore deductions clusions) | | Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| Par | t 3: Lis | t Certain Pay | ments You | Made Befo | re You Filed for I | Bankr | uptcy | | | | |
| 6. | □ No. | Neither De individual p During the S No. Yes * Subject to | btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e | re you filed acch credito beditor. Do no payments to con 4/01/19 r both have re you filed | amily, or househole for bankruptcy, did to whom you paid to include payment of an attorney for the and every 3 years to primarily consumate for bankruptcy, did to whom you paid | d you day total day a total day a total day a total day ou day a total day ou day a total day | pay any creditor tal of \$6,425* or domestic supponkruptcy case. that for cases fi tebts. pay any creditor tal of \$600 or mo | more in rt obligation of a total of a total of the core and the core are core and the core and the core are core and the core are core and the core are core are core and the core are | of \$6,425* or more pay tions, such as cher after the date of \$600 or more? | re? rments and th ild support ar f adjustment. | |
| | | | | ments for do | omestic support of | | | | | | nclude payments to an |
| | Creditor | s Name and | Address | | Dates of payme | nt | Total amor | unt aid | Amount you still owe | Was this p | ayment for |

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Case number (if known) Document Debtor 1 Simonne R. Williams

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | |
|-----|---|------------------------------|------------------------|----------------------|-----------------|----------------------|--|--|
| | ■ No | | | | | | | |
| | ☐ Yes. List all payments to an insider. | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | |
| В. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost | | ments or transfer a | any property on a | ccount of a de | bt that benefited an | | |
| | ■ No | | | | | | | |
| | Yes. List all payments to an insider | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount | Amount you | | this payment | | |
| | | | paid | still owe | Include credi | tor's name | | |
| Par | rt 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | | |
| | List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | cases, small claims action | s, divorces, collectic | n suits, paternity a | ctions, support | or custody | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, f | oreclosed, garnis | hed, attached | , seized, or levied? | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the | | |
| | | Explain what happened | d | | prope | | | |
| 11. | Within 90 days before you filed for bankrul accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details. | | luding a bank or fii | nancial institution | , set off any a | mounts from your | | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date taken | action was | Amount | | |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possess | ion of an assigne | e for the bene | fit of creditors, a | | |
| Par | rt 5: List Certain Gifts and Contributions | | | | | | | |
| 13. | Within 2 years before you filed for bankrup | otcy, did you give any gift | s with a total value | of more than \$60 | 0 per person? | | | |
| | Yes. Fill in the details for each gift. | | | | | | | |
| | Gifts with a total value of more than \$600 per person | - | | | | Value | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | |

Page 33 of 45 Case number (if known) Document Debtor 1 Simonne R. Williams 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You **Consumer Credit Counseling Service Credit Counseling** 5/2/2017 Unknown of SF 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Nο

Yes. Fill in the details.

Person Who Received Transfer Description and value of Date transfer was Describe any property or **Address** property transferred payments received or debts made paid in exchange Person's relationship to you

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Debtor 1 Simonne R. Williams

| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No | | ny property to a | a self-settle | ed trust or similar device | of which you are a | | | |
|-----|--|--|-------------------|--|----------------------------|--|----|--|--|
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Name of trust | Description and | value of the pro | operty tran | sferred | Date Transfer was made | S | | |
| Pa | rt 8: List of Certain Financial Accounts, Ins | truments, Safe Depos | it Boxes, and S | torage Uni | ts | | | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No | r other financial accou | unts; certificate | s of depos | | , , | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number Type of account instrument | | Date account was closed, sold, moved, or transferred | | Last balanc before closing o transfe | or | | |
| 21. | Do you now have, or did you have within 1 you cash, or other valuables? | ear before you filed fo | or bankruptcy, a | any safe de | posit box or other depos | sitory for securities, | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe | the contents | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit of | r place other than you | ır home within | 1 year befo | re you filed for bankrupt | ccy? | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe | the contents | Do you still have it? | | | |
| Pa | rt 9: Identify Property You Hold or Control f | or Someone Else | | | | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | _ | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe | the property | Valu | е | | |
| | rt 10: Give Details About Environmental Info | | | | | | | | |
| | Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these | e air, land, soil, surfac | ce water, groun | • . | | | r | | |
| | Site means any location, facility, or property to own, operate, or utilize it, including dispose | as defined under any | | law, wheth | ner you now own, operat | e, or utilize it or use | d | | |
| | Hazardous material means anything an envir | onmental law defines | as a hazardou | s waste, ha | azardous substance, tox | ic substance, | | | |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Simonne R. Williams

| 24. | Has any governmental unit notified you that y ■ No | ou may be liable or potentially liable (| under or in violation of an environme | ental law? | | | | | |
|-----|--|--|--|--------------------|--|--|--|--|--|
| | Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | |
| 25. | Have you notified any governmental unit of ar | ny release of hazardous material? | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | | |
| Par | 11: Give Details About Your Business or Co | onnections to Any Business | | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing exec | utive of a corporation | | | | | | | |
| | ☐ An owner of at least 5% of the voting of | or equity securities of a corporation | | | | | | | |
| | ■ No. None of the above applies. Go to Par | rt 12. | | | | | | | |
| | ☐ Yes. Check all that apply above and fill in | the details below for each business. | | | | | | | |
| | Business Name Daddress | Describe the nature of the business | Employer Identification number Do not include Social Security | | | | | | |
| | | Name of accountant or bookkeeper | Dates business existed | number of fine. | | | | | |
| 28. | Within 2 years before you filed for bankruptcy institutions, creditors, or other parties. | r, did you give a financial statement to | anyone about your business? Inclu | ude all financial | | | | | |
| | ■ No □ Yes. Fill in the details below. | | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | | | | | | |
| | | | | | | | | | |

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Case number (if known) Debtor 1 Simonne R. Williams

| are true and correct. I understand tha | ent of Financial Affairs and any attachments, and I declare under penalty of perjury that the making a false statement, concealing property, or obtaining money or property by fraud in cles up to \$250,000, or imprisonment for up to 20 years, or both. | |
|--|--|--|
| /s/ Simonne R. Williams | | |
| Simonne R. Williams | Signature of Debtor 2 | |
| Signature of Debtor 1 | | |
| Date July 24, 2017 | Date | |
| Did you attach additional pages to Yo | r Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | |
| No | | |
| □Yes | | |
| Did you pay or agree to pay someone | who is not an attorney to help you fill out bankruptcy forms? | |
| No | | |

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

connection

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| | | | 3.1 | |
|---|--|---|--|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Simonne R. Willia | ıms | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| , , | | | TRICT OF ILLINOIS | |
| Officed States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number (if known) | | | | Chook if this is an |
| (ii kilowii) | | | | ☐ Check if this is an amended filing |
| you have lead You must file the which on the If two married p sign a | ever is earlier, unless the form eople are filing together nd date the form. | nd the lease has r ithin 30 days after e court extends th in a joint case, bo le. If more space i | not expired. You file your bankruptcy petition or by the date the time for cause. You must also send copies to oth are equally responsible for supplying corrects needed, attach a separate sheet to this form. | the creditors and lessors you list tinformation. Both debtors must |
| | our Creditors Who Have | | D: Creditors Who Have Claims Secured by Prope | orty (Official Form 106D) fill in the |
| information b | elow. | | | |
| Identify the ci | reditor and the property the | hat is collateral | What do you intend to do with the property the secures a debt? | hat Did you claim the property as exempt on Schedule C? |
| . | | | _ | |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | □Yes |
| Description of | f | | ☐ Retain the property and enter into a Reaffirmation Agreement. | □ res |
| property | | | Retain the property and [explain]: | |
| securing debt | : | | | |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | LI INO |
| | | | - Notain the property and redecimit. | |

Official Form 108

Creditor's

Description of

securing debt:

Description of

securing debt:

property

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Retain the property and enter into a

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 \square Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Reaffirmation Agreement.

☐ Surrender the property.

☐ Yes

□ No

☐ Yes

☐ No

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| Debtor 1 | Simonne R. Williams | Case number (if known) | |
|--|--|---|---------------------------------|
| name: | otion of | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| propert securin | у | Retain the property and [explain]: | - |
| For any ui | rmation below. Do not list real estate | by Leases you listed in Schedule G: Executory Contracts and Unexpired leases. Unexpired leases are leases that are still in effect; the ty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2 | lease period has not yet ended. |
| Describe | your unexpired personal property leas | ses | Will the lease be assumed? |
| Lessor's r Description Property: | name: nn of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: nn of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: on of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: on of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: on of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: nn of leased | | □ No □ Yes |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Under per | | dicated my intention about any property of my estate that sec | |
| | hat is subject to an unexpired lease. | V | |
| Sim | Simonne R. Williams onne R. Williams ature of Debtor 1 | Signature of Debtor 2 | |
| Date | July 24, 2017 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-21941 Doc 1 Filed 07/24/17 Entered 07/24/17 13:23:38 Desc Main Document Page 43 of 45

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Simonne R. Williams | | Case No. | |
|-------------|--|---|--|-------------------------------------|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSA | TION OF ATTO | RNEY FOR DEB | TOR(S) |
| c | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in | he petition in bankruptcy | , or agreed to be paid to 1 | me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 0.00 |
| | Prior to the filing of this statement I have received | | \$ | 0.00 |
| | Balance Due | | \$ | 0.00 |
| 2. T | he source of the compensation paid to me was: | | | |
| | ☐ Debtor ☐ Other (specify): as provided | d for by the Chicago | Area Pre-Paid Legal F | Plan Fund |
| 3. T | he source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. I | I have not agreed to share the above-disclosed compensation | on with any other persor | unless they are members | s and associates of my law firm. |
| [| I have agreed to share the above-disclosed compensation vecopy of the agreement, together with a list of the names of | | | |
| 5. I | n return for the above-disclosed fee, I have agreed to render le | egal service for all aspec | ets of the bankruptcy case | , including: |
| b c | Analysis of the debtor's financial situation, and rendering a Preparation and filing of any petition, schedules, statement Representation of the debtor at the meeting of creditors and [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications as | of affairs and plan which d confirmation hearing, a e to market value; ex s needed; preparation | h may be required; and any adjourned hearing cemption planning; pr | gs thereof; eparation and filing of |
| 6. B | 522(f)(2)(A) for avoidance of liens on househory agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any dischargany other adversary proceeding. | not include the followin | | relief from stay actions or |
| | | RTIFICATION | | |
| | certify that the foregoing is a complete statement of any agreenkruptcy proceeding. | ement or arrangement fo | or payment to me for repre | esentation of the debtor(s) in |
| Ju Do | ly 24, 2017 te | /s/ Daniel R. Koloda Signature of Attorn Borovsky & Ehrl 111 East Wacker Suite 1325 Chicago, IL 6060 (312) 861-0808 | ziej 6283283 ey lich r Drive | |

United States Bankruptcy Court Northern District of Illinois

| In re | Simonne R. Williams | | Case No. | | | |
|-------|---|---|----------|---|--|--|
| | | Debtor(s) | Chapter | 7 | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | |
| | | Number of Creditors: | | | | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | | |
| Date: | July 24, 2017 | /s/ Simonne R. Williams Simonne R. Williams Signature of Debtor | | | | |

Capital One P.O. Box 30253 Salt Lake City, UT 84130-0253

Capital One / Neiman Marcus P.O. Box 30253 Salt Lake City, UT 84130-0253

Citi Cards P.O. Box 6241 Sioux Falls, SD 57117-6241

Comenity Bank/Victoria's Secret PO Box 182789 Columbus, OH 43218

Credit One Bank
P.O. Box 98873
Las Vegas, NV 89193-8873

Macys P.O. Box 8218 Mason, OH 45040

SYNCB/OLD NAVY PO Box 965036 Orlando, FL 32896-5036

TD Bank USA PO Box 673 Minneapolis, MN 55440